

# Art therapy with adolescents

Shirley Riley, Phillips Graduate Institute, 3445 Balboa Blvd, Encino, CA 91316 [mriley@aol.com](mailto:mriley@aol.com)

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Understanding adolescents is a challenge at best, and the adolescent who is ill or suffering from psychological stress is an even greater conundrum. The physician treats the physical problem but often puzzles over where to find therapeutic treatment for this age group. Teenagers are sensitive about their image, particularly with their peers, and often put themselves at emotional risk rather than confess that they need help from a “shrink.” Furthermore, their view of the “talking” psychotherapies has been shaped by the movies, and they often think that these therapies are only

## Summary points

- Distressed adolescents tend to be uninterested in seeking help from adults
- Art therapy offers a nonthreatening way for teens to express their inner feelings
- Adolescents may “act out” as a cover for their depression; art therapy is useful in assessing and treating such depression
- Art therapy can offer a support system to adolescents experiencing abuse, depression, lack of self-regard, or sudden social or academic failure

for serious “mental” cases. In contrast, they come to art therapy without such preconceived ideas, and this form of therapy has proved effective with adolescents.

Imagery taps into a person’s earliest way of knowing and reacting to the world; therefore, it is not foreign to the experience of learning. Art as a language of therapy, combined with verbal dialogue, uses all of our capacities to find a more successful resolution to our difficulties.

In art therapy, the client is asked to make a collage, make some marks on paper, or

shape a small piece of clay to illustrate the difficulties that have brought them to therapy. The art therapist does not interpret the art piece, and the clients are free to share as much of the meaning of their art as they choose. Adolescents, in particular, are attracted to making symbols and graphic depictions; therefore, they are more attracted to using art as language than to verbal questioning. When the negative behavior is illustrated, it is then external to the individual, and the behavior thus becomes the problem, not the individual.

This externalization of an internal stressor by the creation of “nonartistic art” allows both the therapist and the client to better address the problem. The therapist gains greater knowledge of the problem because the client uses metaphor and narrative to explain the product. The “art” allows clients to distance themselves from their own dilemma and, in that manner, work with the therapist toward alternative solutions to a problem.

## ADOLESCENT DEVELOPMENT

As adolescents mature, they develop the ability to understand abstract concepts and to form judgments. The desire to find their individual selves is processed through stages—an overly intensive absorption with themselves, exaggerated dependency on peers, and withdrawal from parental influences.<sup>1</sup> In addition, societal and economic pressures on adolescents fit into a mold of behaviors that are not necessarily in harmony with their internal stages of maturing. For example, we have all seen the tall 13-year-old boy who is thought of by his teachers and friends as “older” when he may not feel older at all. In many cases, he may even feel younger than his chronologic age. He is in conflict just because his growth mechanisms kicked in earlier than did those of his peers.<sup>2-4</sup> The discrepancies between the adolescents’ expectations, the expectations of society, and the commercial image projected by the media is the source of much of the confusion of today’s youths.

The greatest difficulty for an adult seeking to establish a relationship with an adolescent is the teen’s resistance to authority and lack of trust in the adult world. These stages of adolescent development are normal, but they

work against the traditional forms of verbal therapy.

## THE THERAPEUTIC LANGUAGE OF ART

Art as an expressive language provides an entrée into a relationship with teenagers by tapping into their creativity and offering a form of communication that is nonthreatening and over which the adolescent has control. When teens enter the art therapy room, they find drawing materials and other forms of media on a table. They are invited to draw anything they choose and even to make a statement in images that represent their feelings about being in the therapeutic setting.

This casual approach is a surprise to the teen and counteracts the fears of exposure and pain that may have been expected. The art materials are more than meet the eye. The art therapist understands the evocative powers of, for example, oil pastels, clay, paint, and felt pens. Each form of media, in its own way, assists in the expressive process.<sup>5</sup> The teens feel that they “lucked out” by having a therapist who is not interested in verbal cross-examination. Instead, their therapist is interested in their opinions of their world as expressed through imagery.

## NONJUDGMENTAL ASSESSMENT

Attention to the art that the adolescent produces in the session helps the therapist gain

some idea of the youth’s concerns and life circumstances. Imagery, such as a collage picture, can provide a broad range of information.<sup>6</sup> If therapists understand adolescent concerns, they will not attempt to interpret or assess the psychological state of the youth by imagining what the image means. Adolescents are often suspicious of the art therapist’s skill at interpretation, and they have every right to be cautious. It is only respectful to clients to reserve personal projections and to allow the teens to reveal what they will about their artwork.

The therapist’s stance of neutrality can lead to trust, which is the basis of any form of therapeutic relationship. This principle of neutrality must be established from the beginning of the art therapy relationship. The art therapist has no magic to see meaning in the art; the “magic” comes from the creativity of the teen.<sup>7</sup> Assessment comes about by comparing the art product from session to session and marking the variations that occur both in the art’s content and the clients’ verbal explanations of its meaning.

## DEVELOPMENTAL FIT

Using art in therapy provides a pleasure factor that is not what teens expect to encounter, and it stimulates their desire to be expressive. Drawing, or making marks, is in tune with adolescents’ development, as evidenced by the tagging and graffiti that is abundant in

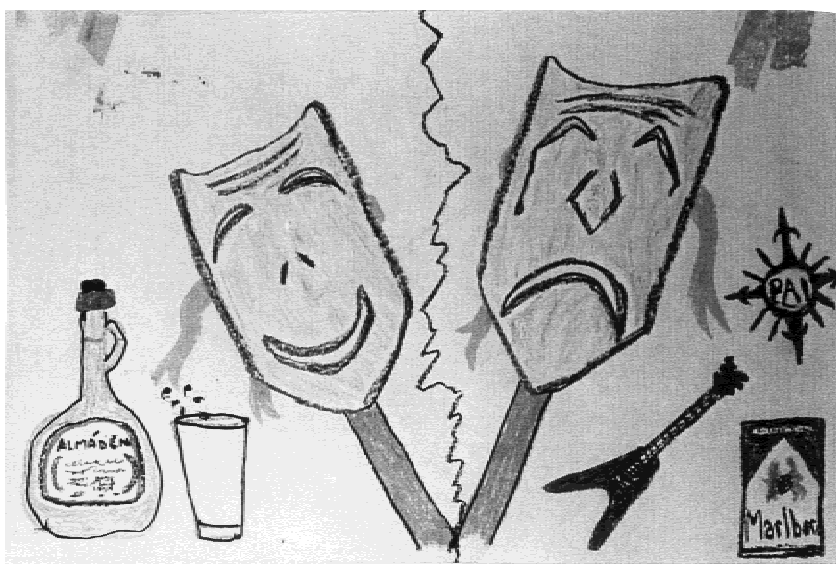
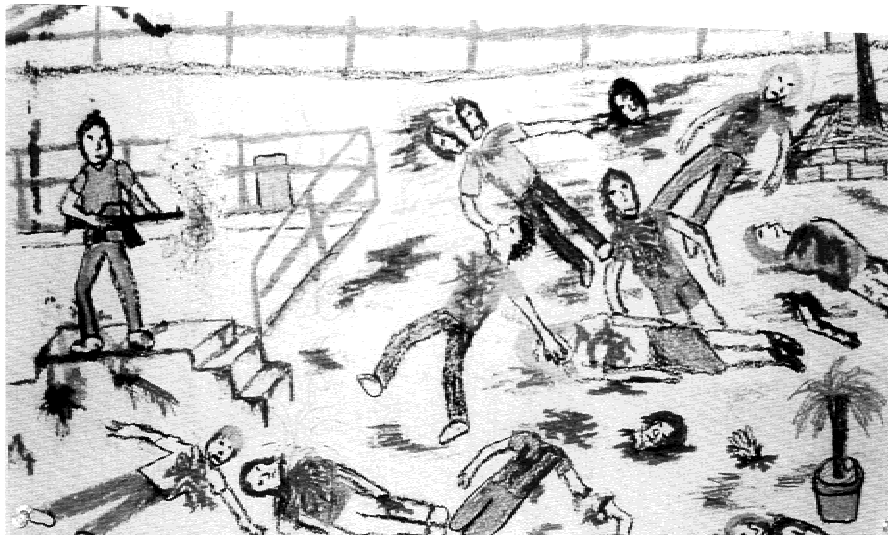


Figure 1 A 13-year-old boy draws the 2 sides he sees of his mother who battles alcoholism



"ME" SHOOTING AT THE MALL.  
DRAWN BY ABUSED BOY OF THIRTEEN.

many cities. It is hard to restrain an adolescent's urge to "make their mark." Channeling this drive into productive communication can neutralize the battle over what to reveal or keep hidden.

The emergence of an image is an extension of the processes of memory and conceptualization. Imagery introduces metaphorical language and personalized communication.<sup>8</sup> If adolescents are asked to show the therapist what needs to be corrected at home, or even in society as a whole, they can do so through the creation of an image. Visual representations concentrate meaning into a tangible form that conveys the entire scope of a situation.

For example, figure 1 shows how a teenager, whose disturbed behavior led to the intervention of health professionals, sees his alcoholic mother. The 2 masks represent the 2 sides to his mother and her inconsistent behavior toward him. The drawing conveys the pain and confusion of growing up with a parent battling alcoholism.

In another example, an abused teen depicted his anger by drawing a "shooting at the mall" (figure 2). He identified himself as the one with the gun and the others as the "enemy gang." Such drawings, which so adequately reveal depression and lack of self worth, require little interpretation.

Both boys who drew these pictures were mild mannered but were failing at school and with their peers. Their repressed emotions were too powerful to be expressed in words; the images provided boundaries and structure within which they could vent their anger. Often, teens have no words available to express their deep feelings. In many cases, the image comes first and the understanding of the visualization comes later.



Art therapy allows this artist to show how his parents "exploded" when he came home

## ADOLESCENT DEPRESSION

Malmquist has said that most teenage "acting out" is a way for youths to cover their depression.<sup>3</sup> The adolescents would rather feel physical pain, or put themselves at risk, than feel the internal pain of depression.

In the developmental cycle of adolescents, depression slows the move toward independence and a secure identity. Therefore, it is helpful to provide a safe outlet for the distress that has engendered the depression. Adolescents with depression that is motivated by situations in the family environment, or in the external world of peers and society, appear to get better when they express their anxieties through art therapy. This improvement has been observed in clinical situations,<sup>7</sup> and art is used as an assessment of depression by Silver in her extensive work through a protocol she developed, called *Draw a Story*.<sup>9,10</sup> The method of treating depression through art therapy is complex and goes beyond the scope of this article.

## ABUSE AND SECRETS

The artistic expressions of an adolescent can also convey messages to the therapist that the youth has been forbidden to verbalize. In families with secrets, often of sexual abuse, the message is "don't tell." The adolescent has been trained by the perpetrator not to *tell*, but no one told him or her not to *draw*. There-

### When should the primary care physician suggest art therapy?

The physician should not look for any particular adolescent or situation per se that would be appropriate for art therapy. If there are concerns about abuse, depression, lack of self-regard, or sudden social or academic failure that cannot be attributed to an illness, then therapy may be considered as a support system.

Art therapy is a compatible mode of therapy for adolescents, but it is soundly based on psychological principles and proven therapeutic skills. Art therapy can be molded to any therapeutic approach and can enhance any therapeutic belief system. An important reason for a physician to recommend art therapy to an adolescent is its attractiveness to individuals in this age group, which increases the chances that the youth will remain in therapy until his or her situation has improved.

fore, adolescents can let the therapist know what is going on in their lives by a visual representation of situations and emotions that focus on the forbidden subject.<sup>11</sup>

It is a grave mistake, however, to assume that a drawing is an absolute testament to abuse. The therapist is actively interested but should be appropriately restrained from making hasty judgments. The art is an invitation to begin a verbal dialogue. Therefore, art therapy is a fusion of 2 forms of communication, 1 visual and 1 verbal.

### FAMILIES WITH ADOLESCENT CHILDREN

Art therapy can help families who are in the throes of adjusting to a new phase in their relationships when one of their children reaches adolescence. The agreeable, understandable, school-aged child has rapidly changed into a moody and unpredictable teenager. The concomitant moodiness, resistance to authority, and pulling away from family life can be a powerful force that sometimes becomes destructive. The family usually is not prepared for this emotional, confrontational shift in the parent-

child relationship because the psychological changes of adolescence come on rapidly, often before physical changes become apparent. The family's form of relating to each other becomes chaotic, particularly at the time the first child enters this phase of development.<sup>12</sup>

Because each member of the family is experiencing tension that is new to them, giving words to their emotions and distress is often difficult. Family therapy offers a way to channel these disturbing emotions in a safe environment. Family art therapy is particularly nonthreatening because it is not confrontational; in fact, by providing art tasks, it even offers a pleasure component. The family can be asked to illustrate, by drawings or collage, their individual opinions of the communication they perceive as faulty. When each drawing is presented for the scrutiny of the other members, it becomes clear that each member has a unique perception of the needed change. Without having to spend time hearing each person's story of anxiety and blame, the art product can be created simultaneously by everyone drawing at the same time, which increases the amount of material that can be addressed and reduces the number of unprofitable conversations. The explanation of the artwork helps to clarify the family conflicts and avoids the misunderstandings that arise when therapy relies on words alone.

Art therapy gives the family an opportunity to circumvent old perceptions of how the family "should" behave and provides new ways for family members to relate to each other. The artwork is a tangible record and reminder of the issues the family addressed. It is not easy to deny that a subject was discussed or a solution suggested if there is a concrete product to confirm the past dialogues.

Families, like individuals, are eager to make changes and get on with their lives. If adolescents have a voice through their art, adults tend to accept their views because they are presented in a nonthreatening way, and adolescents are less hostile because they are

given equal rights in the discussion. These are only 2 of the many ways that art expression can facilitate family therapy, particularly during the chaotic years of adolescence.<sup>13</sup>

### CONCLUSION

Clinical art therapy can be effective for adolescents who usually see it as a nonthreatening form of treatment. The art that the adolescent produces can help the therapist gain some idea of the youth's concerns and life circumstances, especially those situations that are too risky to reveal or too personally embarrassing to relate. This awareness better equips the therapist in efforts to protect and support the adolescent during this turbulent time of life.



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